

ASS. REC. BY:

REF:

CS3/1PC18013797/Gsd3ⁿ²

dist. instruction:

Surveyor:

Guo Qiang

ASSIGNMENT (Office)

From (Person):

ong h ti

of

lpc

Date/Time:

30/7/18 @ 12:14pm

Estimated Cost:

Bill to:

OD (TP) WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SKX 2153Y

Insured:

SGQ 4284Z

at Workshop in/s

N-51 Automotive

Tel:

68420051

of

2 kuki Bkt Ave 2 #01-17/118

Policy No:

Claim No:

18/18/18/VPOS/020794

Sum Insured:

Excess:

Make of Veh:

D.O.A.

29/07/2018

(Client's Record)

CA / REV / REP. / REV 24 HRS

(up)

H.O.D. Endorsement:

Date/Time:

12:40pm @ 30/7/18

Person Contacted:

Melody

Vehicle:

IN/OUT

Date/Time	Action/Instruction (x) Estimate
	SKX 2153Y - CS3/CTI/7008804/Gh3m2 DOA: 29/4/2017
	SGQ 4284Z - CS/ASM/18000831/Urb2-1 DOA: 10/01/2018

Signature

PRS
xhd

REF:

lpc

3046C

ASSIGNMENT

From:

Date:

Estimated Cost:

OD TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

N-51

of

Insured:

Policy No.

Claims No.

Sum Insured:

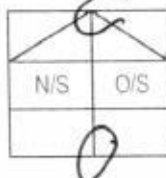
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt.: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 7 days Res.: Yes or No

Lump Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SKX253Y

Yr Regn:

30 Nov 2015

Type: M Car / M Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Toyota Altis

C.C.

1598

Colour:

Blue

A/C:

Insured / Std / NI / NA

Sp. Reading

258488

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No

MROS 3 RBH 10453 8075

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / Rim or

Tyre Size:

F:

205/55 R16

R:

11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

30-07-18

Survey held at

w/s

4:30pm

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

\$7000 - \$8000

RECEIVED 02 AUG 2018

Date/Time, File Pass to?

02/08/18



: Preli. Report



: Final Report

1)

Typst

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS \$

) Photos

) Others

TOTAL

450

Report Format :

PRS

Lump Sum / I.B.I. (\$

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

LONPAC INSURANCE BHD

Ref : CS3/LPC18013797/Gsd3

300 BEACH ROAD

#17-04/07 THE CONCOURSESINGAPORE 199555

Date : 30-07-2018



Code : LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	SGQ 4284Z	Veh. Inspected	SKX 2153Y
Policy No.		Coverage (\$)	0.00
Claim No.	18/18/18/VP05/020794	Excess (\$)	0.00
Assign From	ONG LI LI	Assign Date	30/07/2018

2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--	--

5. General Information

Accident Date	29/07/2018	Inspection Date	30/07/2018
Survey held at	N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.
--

Nivitha (LKK Auto)

From: ONG LI LI <llong@lonpac.com>
Sent: Monday, 30 July 2018 12:14 PM
To: Chin Hui Xin; MT_Claim_SG; assignments@lkkauto.com; Nivitha (LKK Auto)
Subject: Our Ref: 18/18/18/VP05/020794 RE: SKX2153Y & SGQ4284Z - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS
Attachments: 30072018114920-0001.pdf

Without Prejudice
Save as to Costs

Dear Sir/Mdm

We intend to conduct a pre-repair survey of the damage to your client's/your customer's vehicle jointly with your client/your motor workshop. We propose to use one of the motor surveyors named in the following list to conduct the joint pre-repair survey as a single joint expert.

No.	Name	Please tick ✓
1	Kalvin Ang	
2	Xing Guo Qiang	
3	Mohamad Taufikh	
4	Bryan Ang	
5	Adrian Ling	
6	Mohammed Rasul	
7	Marcus Chua	
8	Kenneth Kong	
9	Muhammad Nazril Bin Abdullah	
10	Sathya Sai Kathirrasen	

Please let us know within two (2) working days whether you agree to the appointment of any of these motor surveyors as a single joint expert.

Regards,
Ong Li Li
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road #17-04/07 The Concourse Singapore 199555
Tel : (65) 6250 7388 Ext. 254 Fax: (65) 6296 2706

From: Chin Hui Xin [mailto:huixin@n51.com.sg]
Sent: Monday, 30 July, 2018 11:51 AM

• **To:** MT_Claim_SG

• **Subject:** SKX2153Y & SGQ4284Z - NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS

Dear Sir/Madam,

As per above subject,

Please refer attachment and:-

Kindly propose / provide your 10 surveyors.

Thank you...

Regards,

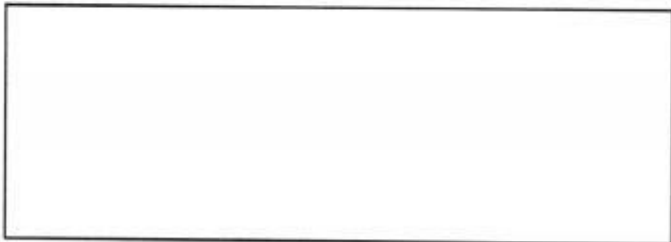
Melody Chin

N-51 Automotive Pte Ltd

Office : 6842 0051

Fax : 6741 0510

www.n51.com.sg





N-51 AUTOMOTIVE PTE LTD

Kaki Bukit Autohub,
2 Kaki Bukit Ave 2, #01-18
Singapore 417921
Tel No. : +65 6842 0051 / 6744 0510 Fax No. : +65 6741 0510
Company Reg. No. : 200616038C
GST Registration No. : 200616038C

Our Ref: **SKX 2153 Y**
Your ref: **SGQ 4284 Z**

30 July 2018

LONPAC INSURANCE BHD
100 BEACH ROAD
#19-00 SHAW TOWER
SINGAPORE 189702
Attn: Motor Claims Department

BY EMAIL mt_claim@lonpac.com ONLY

Dear Sir/Madam,

DATE OF ACCIDENT : 29 July 2018
NOTICE TO INSURER TO CONDUCT PRE-REPAIR INSPECTION WITHIN 3 WORKING DAYS
PURSUANT TO PARAGRAPH 2.2 OF PRE-ACTION PROTOCOL FOR NIMA CASES

We are instructed by **TWINCAR LEASING PTE LTD** to notify you of a road traffic accident on **29 July 2018** at about **09:30 HOURS** At **BALESTIER RD TWD LAVENDER ST JUNCTION INTO CTE(CITY)** involving our client's vehicle **SKX 2153 Y & SGQ 4284 Z** driven by you/your insured at the material time.

As a result of the accident, our client's vehicle has been damaged. Before our client proceed to repair the damaged vehicle , please let us know within 2 working days of your receipt of this notice whether you or your insurer would like to conduct a pre-repair survey of the vehicle. If we do not receive any reply from you within the stipulated timeline, our client shall proceed to repair the vehicle without further reference to you.

Please be inform that we don't excess to Merimen System and kindly reply to us by Email / Fax.

Yours faithfully,



N-51 AUTOMOTIVE PTE LTD

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3046C
Vehicle Details	
Vehicle No.:	SKX2153Y
Vehicle to be Exported:	No
Intended De-registration Date:	31 Jul 2018
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS CLASSIC 1.6 CVT
Primary Colour:	Grey
Manufacturing Year:	2015
Engine No.:	1ZRY205202
Chassis No.:	MR053REH104538075
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$17,804.00
Original Registration Date:	30 Nov 2015
First Registration Date:	30 Nov 2015
Transfer Count:	0
Actual ARF Paid:	\$17,804.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Nov 2025
PARF Rebate Amount:	\$13,353.00
Intended COE Rebate Details	
COE Expiry Date:	29 Nov 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$56,001.00
COE Rebate Amount:	\$41,051.00
Total Rebate Amount:	\$54,404.00

The information contained herein is correct as at 31 Jul 2018

OK

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	30/07/2018 13:16
Date Of Accident	29/07/2018 09:30
Exact Location Of Accident	BALESTIER RD->LAVENDAR ST JUCTION INTO CTE(CITY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX2153Y
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	201533046C
Email Address	SALES@N51.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-96868628

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD17V11639/VPZ/R02
Cover Note Number	

Driver

Name of Driver	PUNG CHUN TIONG
NRIC No	S7110553I
Date Of Birth	22/03/1971
Occupation	OUTDOOR
Date Of Driving Pass	30/03/1994
Driving Experience	24 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93877599
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 307 CANBERRA ROAD #10-91
Postcode	750307
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : UNKNOWN
	GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGQ4284Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: : UNKNOWN

GENDER: : MALE

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHA2824B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 4

Passenger 1

NAME: : UNKNOWN

GENDER: : MALE

Passenger 2

NAME: : UNKNOWN

GENDER: : MALE

Passenger 3

NAME: : UNKNOWN

GENDER: : FEMALE

DETAILS OF INJURED PERSON 1

Name PUNG CHUN TIONG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address BLK 307 CANBERRA ROAD #10-91

Postcode 750307

Sketch Plan


SKETCH PLAN


IMPORTANT NOTICE

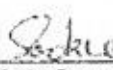
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (a) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

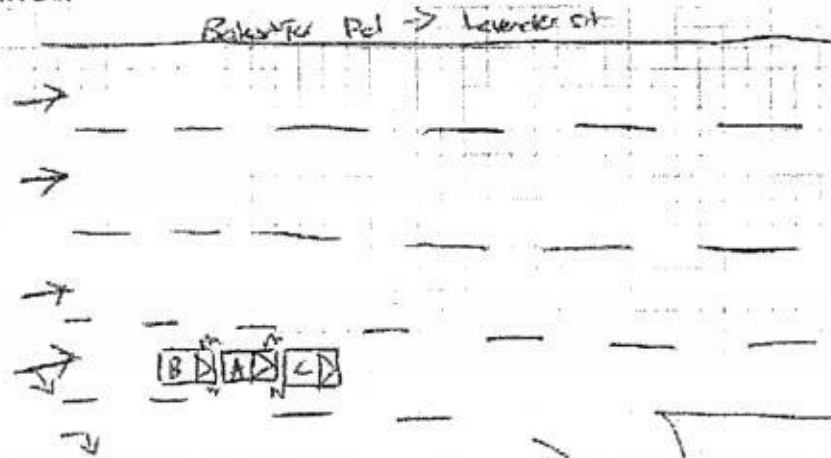

Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



A - SHX 2534
B - SHX 42842
C - SHX 2834B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Baker Rd towards Levee Rd on the 2nd lane of a 5-lane road. Upon seeing the situation of driving right the CIE (left), I slowed down and stopped as the car was stuck on right side. Veh (C) was also stopped stationary ahead of me. Out of no sudden, veh (B) came from the rear and collided directly into the rear portion of my vehicle. Upon the impact, my vehicle moved forward and collided into veh (C). After the accident, I stopped and realized that I was stuck in a total of 3-vehicle crash position.

A - SHX 2534
B - SHX 42842
C - SHX 2834B

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 10/10/2018

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/PIR No:

Vehicle No.	SKX 21532V	Model / Make	Toyota AHTS
Date of Accident	29/7/18		
Time of Accident	9.30 am	HRS	
Location of Accident	Balestier Rd towards Lavender St Junction and LRT (city)		
Exact purpose use during accident	Commercial use		
Name of Owner	Tractor Leasing Pte Ltd		
Telephone No.	H/P: 96968628	Home :	Office :
NRIC	201538044C		
Address	2, Keesik Bldg, A12, #41-17, S(47921)		
Claim type	OD (THIRD PARTY)	REPORTING ONLY	
Insurance Company	Liberty		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	SD17V116391VPZ / 2-2		
Name of Driver	As Above If No, Pung Chun Tung		
NRIC	S7110553 I	Any Passengers :	01 (Male)
Date of birth	22/3/1971		
Occupation	Outdoor / Indoor		
Driving License Pass Date	30/3/1994		
Gender	(Male) / Female		
Contact No.	H/P: 93871599	Home :	Office :
Address	SIC 207, Senterra Rd, #10-91, S(750527)		
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state driver		
Weather condition	(Clear) Raining Other		
Road Surface	(Dry) Wet Other		
Any Injuries	No, If Yes, Who?		
Name And Contact No.	Pung Chun Tung		
Name And Contact No.	Eiji Matsui moto (83400361)		
Police Report	No, If Yes, Where?		
Vehicle B No.	S4Q 4234Z	Any Passengers :	01 (Male)
Name of Driver		Contact No. :	
Vehicle C No.	SHA 2824 B	Any Passengers :	03 (2 male, 1 female)
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	front & rear		
Camera Recorder	Yes / No		
Email Address	sales@nsi.com.sg		
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?			
			Yes / No
PARTICULAR WORKSHOP	NSI Automotive Pte Ltd		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	manager		
FAX NO	6741 0510		

SKETCH PLAN

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

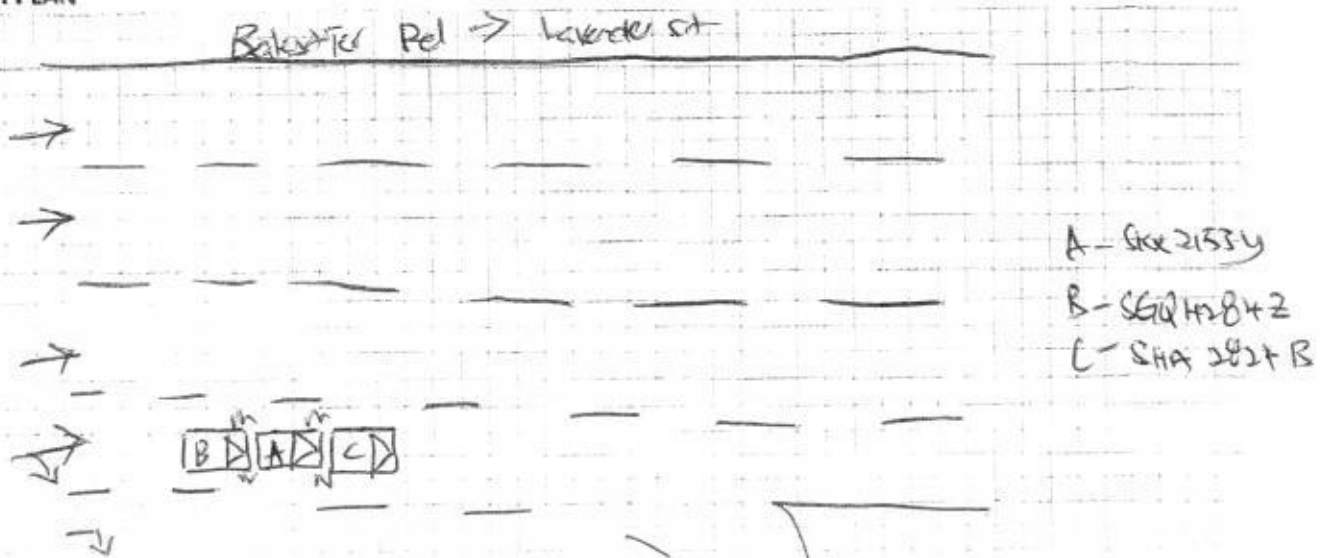


Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

2153 and CTE (City)

I was driving along Baker Rd towards Laver Rd on the 2nd lane of a 5-lanes road. Upon arriving at the junction of turning right into CTE (City), I slowed down and stopped as to comply traffic red light signal. Veh (C) was also stopped stationary ahead of me. Out of the sudden, veh (B) came from the rear and collided directly into the rear portion of my vehicle. Upon the impact, my vehicle surged forward and collided onto veh (C). After the accident, I unhitched and realised that I was involved in a kind of 3-vehicle chain collision.

A - SKX 2153 Y
B - SGQ 4284 Z
C - SHX 2824 B

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

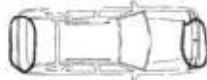
**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.: 1 of 1

PRE-REPAIR INSPECTION REPORT				
LONPAC INSURANCE BHD		Ref: CS3/LPC18013797/Gsd3n2		
300 BEACH ROAD		Date: 02-08-2018		
#17-04/07 THE CONCOURSESINGAPORE 199555		Code: LPC2		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	SGQ 4284Z	Veh. Inspected	SKX 2153Y	
Policy No.		Coverage (\$)	0.00	
Claim No.	18/18/18/VP05/020794	Excess (\$)	0.00	
Assign From	ONG LI LI	Assign Date	30/07/2018	
2. Vehicle Particulars & Condition				
Make & Model	TOYOTA ALTIS	c.c	1598	
Engine No.	HIDDEN	Year of Reg.	2015	
Chassis No.	MR053REH104538075	Colour	BLUE	
Odometer	258488 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	205/55 R16	MICHELIN	6 mm	
L/H Front Tyre	205/55 R16	MICHELIN	6 mm	
R/H Rear Tyre	205/55 R16	MICHELIN	6 mm	
L/H Rear Tyre	205/55 R16	MICHELIN	6 mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE FRONT AND REAR PORTION.				
5. General Information				
Accident Date	29/07/2018	Inspect Date / Time	30/07/2018 (04:30 PM)	
Survey held at	N-51 AUTOMOTIVE PL 2 KAKI BUKIT AVE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921			
5a. Remarks				
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.				

Report Ref No. CS3/LPC18013797/Gsd3n2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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